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NOTICE OF ALLOWANCE AND FEE(S) DUE

27160

7590

10/02/2009

KATTEN MUCHIN ROSENMAN LLP (C/O PATENT ADMINISTRATOR) 2900 K STREET NW, SUITE 200 WASHINGTON, DC 20007-5118

EXAMINER						
ANGADI, MAKI A						
ART UNIT	PAPER NUMBER					
1792						

DATE MAILED: 10/02/2009

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/519,700	09/14/2005	Wade A. Krull	211843-00030	6925

TITLE OF INVENTION: SEMICONDUCTOR DEVICE AND METHOD OF FABRICATING A SEMICONDUCTOR DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1510	\$300	\$0	\$1810	01/04/2010

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW DUE.

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL, or its equivalent, must be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted. If an equivalent of Part B is filed, a request to reapply a previously paid issue fee must be clearly made, and delays in processing may occur due to the difficulty in recognizing the paper as an equivalent of Part B.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

IMPORTANT REMINDER: Utility patents issuing on applications filed on or after Dec. 12, 1980 may require payment of maintenance fees. It is patentee's responsibility to ensure timely payment of maintenance fees when due.

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 (571)-273-2885 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

Note: A certificate of mailing can only be used for domestic mailings of the CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. 27160 7590 10/02/2009 Certificate of Mailing or Transmission KATTEN MUCHIN ROSENMAN LLP I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (C/O PATENT ADMINISTRATOR) 2900 K STREET NW, SUITE 200 WASHINGTON, DC 20007-5118 (Depositor's name (Signature (Date APPLICATION NO. FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE 10/519,700 09/14/2005 Wade A. Krull 211843-00030 6925 TITLE OF INVENTION: SEMICONDUCTOR DEVICE AND METHOD OF FABRICATING A SEMICONDUCTOR DEVICE APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1510 \$300 \$0 \$1810 01/04/2010 **EXAMINER** ART UNIT CLASS-SUBCLASS ANGADI, MAKI A 1792 438-690000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: lssue Fee A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this fo Advance Order - # of Copies _ (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ■ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date Typed or printed name Registration No. This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

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10/519,700	09/14/2005	Wade A. Krull	211843-00030	6925
27160 7590 10/02/2009			EXAM	INER
KATTEN MUC	HIN ROSENMAN L	LP	ANGADI,	MAKI A
(OMINISTRATOR)		ART UNIT	PAPER NUMBER
2900 K STREET I WASHINGTON,	· · · · · · · · · · · · · · · · · · ·		1792 DATE MAILED: 10/02/200	9

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 (571)-272-4200.

	Application No.	Applicant(s)	
Notice of Allowability	10/519,700 Examiner	KRULL ET AL. Art Unit	
·			
	MAKI A. ANGADI	1792	
The MAILING DATE of this communication ap All claims being allowable, PROSECUTION ON THE MERITS herewith (or previously mailed), a Notice of Allowance (PTOL-8 NOTICE OF ALLOWABILITY IS NOT A GRANT OF PATENT of the Office or upon petition by the applicant. See 37 CFR 1.3	IS (OR REMAINS) CLOSED in 35) or other appropriate comm RIGHTS. This application is	n this application. If not included unication will be mailed in due cou	ırse. THIS
1. This communication is responsive to <u>8/5/2009</u> .			
2. X The allowed claim(s) is/are <u>1-23</u> .			
 3.		or (f).	
2. ☐ Certified copies of the priority documents ha		on No	
3. ☐ Copies of the certified copies of the priority	• • •		from the
International Bureau (PCT Rule 17.2(a)).	accuments have been receive	a in the haterial stage application	nom the
* Certified copies not received:			
Applicant has THREE MONTHS FROM THE "MAILING DAT noted below. Failure to timely comply will result in ABANDO! THIS THREE-MONTH PERIOD IS NOT EXTENDABLE.		e a reply complying with the requir	ements
 A SUBSTITUTE OATH OR DECLARATION must be sub INFORMAL PATENT APPLICATION (PTO-152) which g 			ICE OF
5. CORRECTED DRAWINGS (as "replacement sheets") n	nust be submitted.		
(a) ☐ including changes required by the Notice of Draftspo	erson's Patent Drawing Revie	w (PTO-948) attached	
1) ☐ hereto or 2) ☐ to Paper No./Mail Date	.		
(b) ☐ including changes required by the attached Examine Paper No./Mail Date	er's Amendment / Comment o	r in the Office action of	
Identifying indicia such as the application number (see 37 CFF each sheet. Replacement sheet(s) should be labeled as such i			ck) of
6. DEPOSIT OF and/or INFORMATION about the de attached Examiner's comment regarding REQUIREMEN			e the
Attachment(s)	E □ Nation of Im	formal Datant Application	
 Notice of References Cited (PTO-892) Dotice of Draftperson's Patent Drawing Review (PTO-948) 		formal Patent Application ummary (PTO-413),	
 Information Disclosure Statements (PTO/SB/08), 	Paper No.	/Mail Date Amendment/Comment	
Paper No./Mail Date <u>5/12/2009</u>			
4. Examiner's Comment Regarding Requirement for Deposi of Biological Material	it 8. ⊠ Examiner's	Statement of Reasons for Allowa	nce
-	9. 🗌 Other	_•	
/Maki A Angadi/	/Nadine G Nor	ton/	
Examiner, Art Unit 1792	Supervisory Pa	tent Examiner, Art Unit 1792	

Application/Control Number: 10/519,700 Page 2

Art Unit: 1792

Allowable Subject Matter

1. Claims 1-23 are allowed.

2. The following is an examiner's statement of reasons for allowance: The final rejection mailed on 4/2/2009 is withdrawn in view of the cancellation of the rejected claims 26-30 in the reply filed on 8/5/2009. The reasons for allowance of

claims 1-23 are outlined in the final office action.

3. Any comments considered necessary by applicant must be submitted no later than the payment of the issue fee and, to avoid processing delays, should preferably accompany the issue fee. Such submissions should be clearly labeled

"Comments on Statement of Reasons for Allowance."

4. Any inquiry concerning this communication or earlier communications from the examiner should be directed to MAKI A. ANGADI whose telephone number is (571)272-8213. The examiner can normally be reached on 8 AM to 4.30 PM.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Nadine G. Norton can be reached on 571-272-1465. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-

Application/Control Number: 10/519,700 Page 3

Art Unit: 1792

direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/Maki A Angadi/ Examiner, Art Unit 1792

/Nadine G Norton/ Supervisory Patent Examiner, Art Unit 1792



Application/Control No.	Applicant(s)/Patent under Reexamination
10/519,700	438KRULL ET AL.
Examiner	Art Unit

1792

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CLASS	SUBCLASS	CLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)								
438	690	438	515	653	657	690	702	710	787			
INTERNAT	IONAL CLASSIFICATION	257	296	306	330							
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Maki Angadi 8/25/2009 (Assistant Examiner) (Date)			/Nadine Norton/				Total Claims Allowed: 23					
			9/24/09 O.G. Print Claim(s)						O.G. Print Fig.			
(Legal I	Instruments Examiner) ((Date)	(Pr	rimary Examiner) (Da	ite)	1 20					

Maki A. Angadi

	Claims renumbered in the same order as presented by applicant									☐ CPA ☐ T.D.		D.	☐ R.1.47		.1.47				
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